TOTAL

ADDIT. FEE

0

TOTAL

ADDIT, FEE

0

OR

PTO/SB/06 (08-00)
PTO/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
U. S. Pateni and Trademark Office; U.S. DEPARTMENT OF COMMERCE need the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application of Docket Number PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN **CLAIMS AS FILED - PART I SMALL ENTITY** OR SMALL ENTITY (Column 2) (Cohena 1) FOR NUMBER FILED **NUMBER EXTRA** RATE RATE FEE FEE **BASIC FEE** OR (37 CFR 1.16(a) TOTAL CLAIMS x s 9 x 5 18 11 355.00 minus 20 = OR INDEPENDENT CLAIMS 2 minus 3 = 42 = OR x <u>84</u> = (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) + 280 = <u> 140 =</u> OR 0 TOTAL 355 OR TOTAL . If the difference in cohema 1 is less then zero, enter "0" in cohema 2 OTHER THAN **CLAIMS AS AMENDED - PART II** SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING PRESENT NUMBER RATE TIONAL TIONAL RATE **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total <u>s_18</u> = 20 = 0 Minus <u>\$_9</u>_= 20 (37 CFR 1.16(c)) OR Independent 84 _ 42 _ 86 Minus 5 3 2 (37 CFR 1.16(b)) OR 140 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 280 = OR TOTAL OR TOTAL 86 0 ADDIT. FEE ADDIT. FEE (Column 1) (Calumn 3) (Column 2) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE AMENDMENT **PAID FOR** OR x \$_18 = Total 0 U <u>s_</u>9 Minus OR Independent 42 84 _ Minus OR (37 CFR 1.16(b)) 140 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 280 (37 CFR 1.16(4)) OR TOTAL TOTAL 0 0 OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL TIONAL RATE **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE AMENDMENT **PAID FOR** OR Total (37 CFR 1.16(e)) <u>\$9</u>= Minus = OR Independent ... 84 42 = Minus (37 CFR 1.16(b)) OR 140 _ 280 _ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark

Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents. Washington, DC 20231.

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".